## **BEST AVAILABLE COPY**

06

	PATENT APPLICATION FEE DETERMINATION RECORD  Effective October 1, 2000  Application or Docket Number  0983963  HITA.0050												
		SMAL TYPE	SMALL ENTITY TYPE			OTHER THAN							
TOTAL CLAIMS			16				RAT	E	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			/6 minus 20=		. 0		X\$	9=		OR	X\$18=		
INDEPENDENT CLAIMS			7 minus 3 =		. 4		X40	)=		OR	X80=	320.	00
MU	LTIPLE DEPEN	DENT CLAIM PR	RESENT									Sau	
* If the difference in column 1 is less than zero, enter "0" in column 2								5=		OR	+270=		
TOTALON TOTAL											1030	. 0	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							SMA		ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA	RA	ΓE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
DME	Total	. 14	Minus		B	= /	X\$	9=		OR	X\$18=		
MEN	Independent	. 6	Minus	***	7	=/	X44	)=		OR	X80=		1 .
4	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM					1		<b> </b>	1
	t						+13	5= OTAL		OR	+270= TOTAL	ļ	4
		4					ADDIT			OR	ADDIT. FEE		4
_		(Column 1) CLAIMS			mn 2)	(Column 3)			LADDI	1	F	ADDI	1
ENT B		REMAINING AFTER AMENDMENT		PREV	ABER OUSLY FOR	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIC NAL FEE	
NOW	Total	. 14	Minus	5	20	=	X\$	9=		OR	X\$18=		
AMENDMENT	Independent	6:	Minus	/	7	-	X4	0=	•	OR	X80=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								5=		OR	+270=		
					•		L	OTAL		OR	TOTAL		1
		<b>10.1 11</b>		10-1		(0-1	ADDIT	FEE		Jon	ADDIT. FEE		1
		(Column 1) CLAIMS	7	HIG	IMN 2) HEST	(Column 3)			ADDI-	1		ADDI-	-
AMENDMENT C		REMAINING AFTER AMENDMENT		PREV	MBER IOUSLY DFOR	PRESENT EXTRA	RA	TE	TIONAL FEE		RATE	TIONAL	
NON	Total	14	Minus	0	20	= /	X\$	9=		OR	X\$18=	<u>.</u>	
AME	Independent	NTATION OF M	Minus	•••	7	1-/_	X4	0=		OR	X80=	1	
	I LIDEI BDECE				II CH AIM								

OR

OR

TOTAL

ADDIT. FEE

+135=

ADDIT. FEE

TOTAL

<sup>\*</sup> If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.